ATTACHMENT 7C

AREA BENEFIT ANALYSIS

(If project has multiple locations, a separate analysis is required for each location)

PROJECT NAME:

AGENCY:
1. Define the boundaries of the Service Area (logical perimeter for access and use by residents, usually a few blocks, based upon the location of the project). In this narrative, include the street names for the North, East, South and West boundaries. Note: the service area must be primarily residential , however include in your narrative description any schools, clinics, libraries, or other public facilities located within the area, distance from project, and obtain statistics provided by those facilities that show that Low Mod-Income residents within the area utilize the facility.
2. Describe the nature of the activity. How will this project serve the residents? Will this project serve a particular group of residents? Is this project adequate to meet the needs of residents within Service Area?

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	AREA BENEFII ANALYSI)
PROJECT NAME:		

AGENCY:

3.	Discuss	and des	cribe any	accessibilit	y issues	associated	with	activity.	This mig	ht inclu	ide g	eographic
ba	rriers tha	t preclud	de resider	its from utili	zing pro	ject or facil	ity.	Language	barriers	might	also	constitute
an	accessib	oility issu	e in some	circumstan	ces.							

4. Provide detailed census data to show that at least 51% of the residents within the defined Service Area are Low-Moderate Income. To determine the percentage of LMI persons in the service area, grant recipients may find it useful to utilize CPD'S mapping program located at http://egis.hud.gov/cpdmaps/ or http:/

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PROJECT NAME:

AGENCY:

5. Submit a map of the project clearly showing the boundaries of the Service Area, specific location of project, any public facilities within area whose information you utilized, and geographical barriers (if any). If attached, be sure to label the map with the project name and agency name.